



CONTRACT AWARD SHEET
Internal Services Department
Procurement Management Services

Bid No. 5469-6/13-6
Award Sheet

Procurement Management Division DIVISION

BID NO.: **5469-6/13-6**

PREVIOUS BID NO.:

TITLE: **LIQUID LEVEL CONTROL SYSTEMS-PREQUAL**

CURRENT CONTRACT PERIOD: **01/01/2013** through **12/31/2018**

Total # of OTRs: **6**

MODIFICATION HISTORY

Bid No. 5469-6/13-6

Award Sheet

DPM Notes

This document may reflect inaccurate information regarding the vendors' SBE/Micro Certifications and/or the vendors' ability to claim Local Preference. Contract users must ascertain Micro/SBE Certification Status and Local Preference eligibility at the time of quote.

APPLICABLE ORDINANCES

LIVING WAGE: **No**

UAP: **Yes**

IG: **Yes**

OTHER APPLICABLE ORDINANCES:

CONTRACT AWARD INFORMATION:

Yes Local Preference

Yes Micro Enterprise

No Full Federal Funding

No Performance Bond

Yes Small Business Enterprise (SBE)

No PTP Funds

No Partial Federal Funding

Yes Insurance

Miscellaneous:

REQUISITION NO.:

PROCUREMENT AGENT: **Erin Gore-Morris**

PHONE: 305 375-4254

FAX:

EMAIL: eringm@miamidade.gov

VENDOR NAME: **MULTITRODE INC**
 DBA:
 FEIN: **232624171** SUFFIX : **01** 3348728
 STREET: **990 SOUTH ROGERS CIRCLE SUITE #3** CITY: **BOCA RATON** ST: **FL** ZIP:
 FOB_TERMS: **DEST** DELIVERY:
 PAYMENT TERMS: **NET30** TOLL PHONE: **-**

VENDOR INFORMATION:

CERTIFIED VENDOR

ASSIGNED MEASURES

Local Vendor:

SBE	Set Aside	Bid Pref.
Micro Ent.	Selection Factor	Goal
Other:	Vendor Record Verified?	

Vendor Contacts:

Name	Phone1	Phone2	Fax	Email Address
CATHY ROSS	561-994-8090	-	561-994-6282	CATHYR@MULTITRODE.COM

VENDOR NAME: **XYLEM WATER SOLUTIONS USA INC**
 DBA:
 FEIN: **452080074** SUFFIX : **01** 28273
 STREET: **14125 SOUTH BRIDGE CIRCLE** CITY: **CHARLOTTE** ST: **NC** ZIP:
 FOB_TERMS: **DEST** DELIVERY:
 PAYMENT TERMS: **NET45** TOLL PHONE: **-**

VENDOR INFORMATION:

CERTIFIED VENDOR

ASSIGNED MEASURES

Local Vendor:

SBE	Set Aside	Bid Pref.
Micro Ent.	Selection Factor	Goal
Other:	Vendor Record Verified?	

Vendor Contacts:

Name	Phone1	Phone2	Fax	Email Address
Rick Reyes	561-6994077	-	561-8481299	rick.reyes@xyleminc.com

VENDOR NAME: **ALTTEC CORP**
 DBA: **DIGITAL CONTROL COMPANY**
 FEIN: **562599186** SUFFIX : **01** **33762**
 STREET: **4260 114 TERRACE NORTH** CITY: **CLEARWATER** ST: **FL** ZIP:
 FOB TERMS: **DEST** DELIVERY:
 PAYMENT TERMS: **NET30** TOLL PHONE: **800-335-5219**

VENDOR INFORMATION:

CERTIFIED VENDOR

ASSIGNED MEASURES

Local Vendor:

SBE	Set Aside	Bid Pref.
Micro Ent.	Selection Factor	Goal
Other:	Vendor Record Verified?	

Vendor Contacts:

Name	Phone1	Phone2	Fax	Email Address
JOHN D CATTEL - PRESIDENT	727-547-1622	800-335-5219	727-547-1722	DCC@DIGITALCC.COM

VENDOR NAME: **M P ELECTRONICS INC**
 DBA:
 FEIN: **592579692** SUFFIX : **01** **32703**
 STREET: **2464 VULCAN ROAD** CITY: **APOPKA** ST: **FL** ZIP:
 FOB TERMS: **DEST** DELIVERY:
 PAYMENT TERMS: **NET30** TOLL PHONE: **-**

VENDOR INFORMATION:

CERTIFIED VENDOR

ASSIGNED MEASURES

Local Vendor:

SBE	Set Aside	Bid Pref.
Micro Ent.	Selection Factor	Goal
Other:	Vendor Record Verified?	

Vendor Contacts:

Name	Phone1	Phone2	Fax	Email Address
JOHN A EVANS	407-299-3825	-	407-294-9435	JOHN_EVANS@MPELECTRONICS.COM

VENDOR NAME: **CUSTOM CONTROLS TECHNOLOGY INC**
 DBA:
 FEIN: **650003633** SUFFIX : **01** 33010
 STREET: **705 W 20TH STREET** CITY: **HIALEH** ST: **FL** ZIP:
 FOB TERMS: **DEST** DELIVERY:
 PAYMENT TERMS: **NET30** TOLL PHONE: **888-693-4495**

VENDOR INFORMATION:

CERTIFIED VENDOR

ASSIGNED MEASURES

Local Vendor:

SBE	Set Aside	Bid Pref.
Micro Ent.	Selection Factor	Goal
Other:	Vendor Record Verified?	

Vendor Contacts:

Name	Phone1	Phone2	Fax	Email Address
GERARDO GALLO	305-805-3700	888-693-4495	305-805-3440	GERRY@CUSTOMCONTROL.NET

VENDOR NAME: **JOHN MADER ENTERPRISES INC**
 DBA: **MADER ELECTRIC MOTORS**
 FEIN: **650048538** SUFFIX : **01** 33903
 STREET: **18161 N TAMIAMI TRAIL** CITY: **N FT MYERS** ST: **FL** ZIP:
 FOB TERMS: **DEST** DELIVERY:
 PAYMENT TERMS: **NET30** TOLL PHONE: **-**

VENDOR INFORMATION:

CERTIFIED VENDOR

ASSIGNED MEASURES

Local Vendor:

SBE	Set Aside	Bid Pref.
Micro Ent.	Selection Factor	Goal
Other:	Vendor Record Verified?	

Vendor Contacts:

Name	Phone1	Phone2	Fax	Email Address
JEREMY D MADES	239-731-5455	-	239-731-8165	MADERELECTRICMOTORS@MSN.COM

VENDOR NAME: **KAMAN INDUSTRIAL TECHNOLOGIES CORP**
 DBA:
 FEIN: **060914701** SUFFIX : **02** 33178
 STREET: **10050 NW 116 WAY, SUITE 1** CITY: **MIAMI** ST: **FL** ZIP:
 FOB TERMS: **DEST** DELIVERY:
 PAYMENT TERMS: **1%10NET30** TOLL PHONE: **-**

VENDOR INFORMATION:

CERTIFIED VENDOR

ASSIGNED MEASURES

Local Vendor:

SBE	Set Aside	Bid Pref.
Micro Ent.	Selection Factor	Goal
Other:	Vendor Record Verified?	

Vendor Contacts:

Name	Phone1	Phone2	Fax	Email Address
PABLO RODRIGUEZ	305-5738424	-	305-5737366	

ITEMS AWARDED Section:

Details: **5469-6/13-6**

SEE ROADMAP

<u>Item #</u>	<u>Description</u>	<u>Qty</u>	<u>Unit Price</u>
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End of ITEMS AWARDED Section

AWARD INFORMATION Section

BCC Award: DPM Award: **No**
 BCC Date: DPM Date: **12/21/2012**

Contract Amount: \$ **2,724,000.00**

Additional Items Allowed:

Agenda Item No.:

Special Conditions:

BPO INFORMATION Section:

1	ABCW1300177	
	Commodity ID	Commodity Name
	220-33	LIQUID LEVEL CONTROLLERS, INDICATORS,
	Department	Department Allocation
	WS	\$2,724,000.00

End of BPO Information Section